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7590

10/29/2003

ROBERT J. BARAN (T2-7H)  
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I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO, on the date indicated below.

Bonnie Ferguson	(Depositor's name)
<i>Bonnie Ferguson</i>	(Signature)
1/8/2004	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/087,867	02/28/2002	Robert M. Burk	17008DIV5CON3(AP)	9687

TITLE OF INVENTION: CYCLOPENTANE(ENE)HEPTENOIC OR HEPTANOIC ACIDS AND DERIVATIVES THEREOF USEFUL AS THERAPEUTIC AGENTS

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1330	\$300	\$1630	01/29/2004

EXAMINER	ART UNIT	CLASS-SUBCLASS
GERSTL, ROBERT	1626	514-530000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  
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2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

- Robert J. Baran
- Martin A. Voet
- Carlos A. Fisher

## 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

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(A) NAME OF ASSIGNEE

Allergan, Inc.

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Irvine, California USA

Please check the appropriate assignee category or categories (will not be printed on the patent); ☐ individual ☒ corporation or other private group entity ☐ government

4a. The following fee(s) are enclosed:

- ☒ Issue Fee  
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☒ Advance Order - # of Copies 10

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(Authorized Signature)

(Date)

*R J Baran*

1/6/04

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